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|--|-------------------|------------------------|-------------|
| Application Number | 10/743,337 | | |
| Filing Date | December 23, 2003 | | |
| First Named Inventor | Takako TAKASU | | |
| Group Art Unit | To Be Assigned | | |
| Examiner Name | To Be Assigned | | |
| Total Number of Pages in This Submission | 3 | Attorney Docket Number | 740756-2691 |

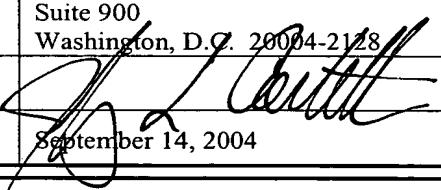
ENCLOSURES (check all that apply)

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|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO Form-1449 with one (1) reference |
|---|--|---|

Remarks

The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|--------------------------------------|--|--|
| Firm <i>or</i> Individual name | Jeffrey L. Costellia, Registration No. 35,483 Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128 | |
| Signature |  | |
| Date | September 14, 2004 | |

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

I hereby certify that this correspondence is being:

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)
Takako TAKASU et al.) Examiner: To Be Assigned
Serial No. 10/743,337) Group Art Unit: To Be Assigned
Filed: December 23, 2003) Date: September 14, 2004
For: POLYMER, ELECTROLUMINESCENT)
DEVICE, AND LIGHT EMITTING)
DEVICE (As Amended))

INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
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Sir:

In accordance with the provisions of 37 C.F.R. 1.56 and 37 C.F.R. 1.97-1.99, it is requested that the reference listed on the attached Form PTO-1449 be made of record in the above-identified application. A copy of the reference is submitted herewith in accordance with 37 C.F.R. 1.98(a).

Applicants provide herein a partial translation and Japanese language version of an International Preliminary Examination Report issued on July 27, 2004 in PCT/JP03/16029, which claims the same Japanese priority application as the instant application. The references cited therein have already been submitted.

It is requested that the accompanying PTO-1449 be considered and made of record in the above-identified application. To assist the Examiner, the document is listed on the attached form PTO-1449. It is respectfully requested that an Examiner-initial a copy of this form be returned to the undersigned.

The Commissioner is hereby authorized to charge any fees connected with this filing which may be required now, or credit any overpayment to Deposit Account No. 19-2380 (740756-2691).

Respectfully submitted,

By: 

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***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.